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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/743,128	12/23/2003	Teruzo Toi	246879US0	8476
22850 7590 06/04/2008 OBLON, SPIVAK, MCCLELLAND MAIER & NEUSTADT, P.C. 1940 DUKE STREET			EXAMINER	
			REDDY, KARUNA P	
ALEXANDRIA	IDRIA, VA 22314		ART UNIT	PAPER NUMBER
			1796	
			NOTIFICATION DATE	DELIVERY MODE
			06/04/2008	ELECTRONIC

Please find below and/or attached an Office communication concerning this application or proceeding.

The time period for reply, if any, is set in the attached communication.

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Intonvious Summans	10/743,128	0/743,128 TOI ET AL.	
Interview Summary	Examiner	Art Unit	
	KARUNA P. REDDY	1796	
All participants (applicant, applicant's representative, PTO	personnel):		
(1) <u>KARUNA P. REDDY</u> .	(3)		
(2) <u>Kirsten Gruneberg</u> .	(4)		
Date of Interview: 29 May 2008.			
Type: a)⊠ Telephonic b)⊡ Video Conference c)⊡ Personal [copy given to: 1)⊡ applicant 2	2)∏ applicant's representative	e]	
Exhibit shown or demonstration conducted: d) Yes If Yes, brief description:	e) No.		
Claim(s) discussed:			
Identification of prior art discussed:			
Agreement with respect to the claims f)☐ was reached. g)∏ was not reached. h)∏ N	I/A.	
Substance of Interview including description of the general reached, or any other comments: <u>Applicant confirmed the a Khanh on 5/29/2008</u> .			
(A fuller description, if necessary, and a copy of the amend allowable, if available, must be attached. Also, where no callowable is available, a summary thereof must be attached	opy of the amendments that w		
THE FORMAL WRITTEN REPLY TO THE LAST OFFICE A INTERVIEW. (See MPEP Section 713.04). If a reply to the GIVEN A NON-EXTENDABLE PERIOD OF THE LONGER INTERVIEW DATE, OR THE MAILING DATE OF THIS INT FILE A STATEMENT OF THE SUBSTANCE OF THE INTERPRIEMENTS on reverse side or on attached sheet.	last Office action has already OF ONE MONTH OR THIRTY ERVIEW SUMMARY FORM, '	been filed, APP DAYS FROM T WHICHEVER IS	LICANT IS THIS LATER, TO
Evaminar Nota: Vou must sign this form unless it is an	Examiner's signature, if requi	rod	
Examiner Note: You must sign this form unless it is an	Liaminer 5 Signature, il requi	I C U	

Application No.

Applicant(s)